

INCOMPLETE TRAVEL CLAIM NOTICE

FROM:

TO:

Your travel claim is returned for additional information or documentation as indicated below. Upon completion of necessary action, return your claim with this notice attached.

1. ITINERARY		F. RECEIPTS FOR ANY ITEM OF REIMBURSABLE EXPENSE GREATER THAN \$25.00.	
A. COMPLETE FULLY, SHOWING POINTS OF DEPARTURE TDY, DELAY, AND ARRIVAL.		7. NONAVAILABILITY STATEMENT	
B. USE ABBREVIATIONS SHOWN ON BACK OF DD FORM 1351-2.		A. QUARTERS AND/OR MESS, DD FORM 1351-5.	
C. SHOW USE OF DEDUCTIBLE MEALS, AND GOVERNMENT/OPEN MEALS.		B. ADVERSE EFFECT/IMPRACTICALITY, AF FORM 2282.	
2. REIMBURSABLE EXPENSE. ITEMIZE EACH ITEM OF EXPENSE SHOWING DATES/PLACES.		C. NONAVAILABILITY OF DIRECTED MODE OF TRANSPORTATION.	
3. TRANSPORTATION REQUESTS/MEAL TICKETS. IDENTIFY ALL TRANSPORTATION REQUEST (TRs), MEAL TICKETS (MTs), AND MAC TRANSPORTATION AUTHORIZATIONS (MTAs) ISSUED FOR TRAVEL.		8. AMENDMENTS TO ORDERS REQUIRED FOR:	
4. SHOW COST OF LODGING.			
5. SIGNATURE, SIGN AND/OR DATE THE CLAIM.			
6. ATTACHMENTS NEEDED.		9. OTHER (Specify)	
A. ____ COPIES OF BASIC ORDER AND ALL AMENDMENTS THERETO.			
B. COPIES OF TRs (SF 1169B), MTs (DD Form 652), MTAs (DD FORM 1482-1), PASSENGER NAME RECORD (PNR) (AF FORM 529), AND OR GOVERNMENT EXCESS BAGGAGE AUTHORIZATION (GEBAs).			
C. IF TRs--MTs, MTAs, OR CARRIER TICKETS UNUSED, ATTACH COPY OF DD FORM 730.		FOR FURTHER ASSISTANCE WITH YOUR TRAVEL CLAIM CONTACT: EXT.	
D. LODGING RECEIPTS.			
E. DAILY MOTOR VEHICLE TRIP TICKET, GSA FORM 312.			

REMARKS

TYPED NAME AND TITLE

SIGNATURE

DATE